

LOBBYIST REGISTRATION AFFIDAVIT

| 1. | Lobbyist Name: | FUENTES | JOSE | | K. | | | | |
|----|---|---|-----------|----------|--------|--|--|--|--|
| | | Last Name | First | | Middle | | | | |
| | Lobbyist Phone: | (305) 260-18-18 | | | | | | | |
| | | | | | | | | | |
| | Lobbyist Address: | Alhambra Towers, 121 Alhambra Plaza, 10th Floor, Coral Gables, FL 33134 | | | | | | | |
| | | Street | City | State | Zip | | | | |
| 2. | Principal Represented: Property Registration Champions | | | | | | | | |
| | Principal Address: | 2725 Center Place, | Melbourne | FL | 32940 | | | | |
| | | Street | City | State | Zip | | | | |
| | Other Principals or Interests and Address (Detail): | | | | | | | | |
| | 17 | | | | | | | | |
| | | | | | | | | | |
| | - | | | | | | | | |
| 3. | Specific Issue on which the Lobbyist has been retained (Describe in Detail): | | | | | | | | |
| | | | | | | | | | |
| | Compliance, property registration | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | Lobbyist specifically | Lobbyist specifically includes principal as well as any agent, officer, or employee of a principal. Each person | | | | | | | |
| | who withdraws as a lo | who withdraws as a lobbyist is required to file a Certificate of Withdrawal. | | | | | | | |
| 4. | Registration Fee paid | ? NOYE | ES (Cash | or Check | | | | | |
| | | | | or eneck | 1 | | | | |
| 5. | Please identify all Council People or Personnel to be lobbied: | | | | | | | | |
| | | | | | | | | | |
| | Commission, City N | Manager | | | | | | | |
| | | | | | | | | | |
| 5. | The subject matter in number (3) above is to be considered at which meeting? (Check all applicable) | | | | | | | | |
| | City Council | | | | | | | | |
| | Zoning Board of Adju | stment | | | | | | | |
| | Planning Commission | | | | | | | | |
| | City Board | | | | | | | | |
| | RFP Review/Selection | n Committee | | | | | | | |
| | Others (Specify) | | | | | | | | |
| | | | | | | | | | |

76 NE 125 Street | North Miami | Florida | 33161

305.893.6511

| None | | | |
|--|------------------------|--------------|--|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | OATH | |
| | | | |
| STATE OF FLORIDA |) | | |
| COUNTY OF MIAMI-DADE Brown |) | | |
| f, the undersigned registrant, do hereby attachments are true and correct. | depose und | der oath and | say that the information disclosed and any |
| | | | Signature |
| Sworn to and subscribed before me this | 23 | day of | Feb , 20 18. |
| COLLEEN LAPLA MY COMMISSION # Gr EXPIRES: June 16 Bonded Thru Notary Public U | NT G 074335 2021 | | Notary Public |
| The second secon | | | My Commission Expires: |